

- ☒ Initial Application
☐ Amended Application

Date: 6/28/18



City of Tucson
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

18-284-CT

COMMITTEE TYPE (choose one):

☐ Candidate

Committee Name (required): _____
(first or last name & office)

Candidate Information: Candidate's Name (required): _____
Candidate's mailing address (required): _____
Candidate's email address (required): _____
Candidate's phone number (required): _____
Candidate's website (if any): _____

Office Sought (choose one): ☐ Mayor ☐ Council Member, Ward _____

Election Cycle for Office Sought (year the election will take place) (required): _____

Party Affiliation: ☐ Democrat ☐ Libertarian ☐ Republican ☐ Other: _____
(required)

☐ Political Action Committee (PAC)

Committee Name (required): _____ Yes on Prop 407
(if sponsored, must include sponsor's name)

Political Function (optional): ☐ Contributions ☐ Candidate-Related Independent Expenditures
(select any that apply) ☒ Ballot Measure Expenditures ☐ Recall Expenditures

Sponsorship Information: Sponsor's name or nickname (required): _____
(if applicable) Sponsor's mailing address (required): _____
Sponsor's email address (required): _____
Sponsor's phone number (if any): _____
Sponsor's website (if any): _____

Special Status must be filed with Secretary of State ☐ Separate Segregated Fund of a Corporation, LLC, Partnership, or Union
(if applicable) ☐ Standing Committee (must also complete separate standing committee registration)
☐ Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)

☐ Political Party

Committee Name (required): _____
(must include party affiliation)

Jurisdiction: ☐ State Party (must include proof of qualification pursuant to A.R.S. § 16-801 or § 16-804)
☐ County Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)
☐ Legislative District Party (must include proof of organization pursuant to A.R.S. § 16-823)
☐ City or Town Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)

Special Status must be filed with Secretary of State ☐ Standing Committee (must also complete separate standing committee registration)
(if applicable)

199605
O-file

X-CFA

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City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

18 JUN 29 P3:26

COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): 4500 E Speedway Blvd #41
Committee's email address (required): beccawicker@gmail.com
Committee's phone number (if any): _____
Committee's website (if any): _____

Chairperson's Information: Chairperson's name (required): Bruce Burke & Tom Warne
Chairperson's physical address (required): 3849 E Broadway #298 - 6701 N St Andrews
Chairperson's mailing address (if different): Tucson, AZ 85716 - Tucson, AZ 85718
Chairperson's email address (required): bruce@burkepc.com - jlinvestments@aol.com
Chairperson's phone number (required): 520-360-6450 - 520-907-0672
Chairperson's employer (required): Self - Self
Chairperson's occupation (required): Attorney - Investor

Treasurer's Information: Treasurer's name (required): Rebecca Wicker
Treasurer's physical address (required): 4500 E. Speedway Blvd #41, Tucson, AZ 85712
Treasurer's mailing address (if different): _____
Treasurer's email address (required): beccawicker@gmail.com
Treasurer's phone number (required): 520-310-1619
Treasurer's employer (required): Self
Treasurer's occupation (required): Business Owner

Bank or Financial Institution: Bank name (required): Wells Fargo
(do not list acct numbers) Additional bank name (if applicable): _____
Additional bank name (if applicable): _____

DECLARATION AND SIGNATURES:

I declare under penalty of perjury that the foregoing information is true and correct. I further declare that I: (1) consent to serve as chairperson or treasurer of the committee named herein, if applicable; (2) designate the above-named committee as my official candidate committee and authorize it to receive/make contributions/expenditures on my behalf, if applicable; (3) have read the Secretary of State's campaign finance and reporting guide; (4) agree to comply with Arizona election law, including campaign finance laws codified at A.R.S. §§ 16-901 to 16-938; and (5) agree to accept all notifications and legal service of process for campaign finance purposes via the email address(es) provided herein.

Chairperson's signature: _____

Date: _____

Treasurer's signature: [Signature]

Date: 6/29/18

Candidate's signature (if applicable): _____

Date: _____

Amended Application

Date: 6/28/18



COMMITTEE STATEMENT OF ORGANIZATION

(office use only)

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Committee's phone number (if any):
Committee's website (if any):

Chairperson's Information: Chairperson's name (required): Bruce Burke & Tom Warne
Chairperson's physical address (required): 3849 E Broadway #298 - 6701 N St Andrews
Chairperson's mailing address (if different): Tucson, AZ 85716 - Tucson, AZ 85718
Chairperson's email address (required): bruce@burkepc.com - jlinvestments@aol.com
Chairperson's phone number (required): 520-380-8450 - 520-907-0672
Chairperson's employer (required): Self - Self
Chairperson's occupation (required): Attorney - Investor

Treasurer's Information: Treasurer's name (required): Rebecca Wicker
Treasurer's physical address (required): 4500 E. Speedway Blvd #41, Tucson, AZ 85712
Treasurer's mailing address (if different):
Treasurer's email address (required): beccawicker@gmail.com
Treasurer's phone number (required): 520-310-1619
Treasurer's employer (required): Self
Treasurer's occupation (required): Business Owner

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Chairperson's signature: Tom Warne

Date: 6/29/18

Treasurer's signature: _____

Date: _____

Candidate's signature (if applicable): _____

Date: _____

OFFICE OF THE
CITY CLERK
18 JUN 29 P 3:30
RECEIVED

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 Chairperson's email address (required): bruce@burkepc.com - jlinvestments@aol.com
 Chairperson's phone number (required): 520-360-6450 - 520-907-0672
 Chairperson's employer (required): Self - Self
 Chairperson's occupation (required): Attorney - Investor

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Chairperson's signature: Bruce Burke

Date: 6/28/18

Treasurer's signature: _____

Date: _____

Candidate's signature (if applicable): _____

Date: _____

OFFICE OF THE
CITY CLERK

18 JUN 29 P 3:26

RECEIVED
CITY OF TUCSON